

Best Available Copy

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS		4/27
O.I.P.E. CLASSIFIER		6, 16	4-29-99
FORMALITY REVIEW			5-19-99

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	3/3/04
2	✓	✓	3/3/04
3	✓	✓	3/3/04
4	✓	✓	3/3/04
5	✓	✓	3/3/04
6	✓	✓	3/3/04
7	✓	✓	3/3/04
8	✓	✓	3/3/04
9	✓	✓	3/3/04
10	✓	✓	3/3/04
11	✓	✓	3/3/04
12	✓	✓	3/3/04
13	✓	✓	3/3/04
14	✓	✓	3/3/04
15	✓	✓	3/3/04
16	✓	✓	3/3/04
17	✓	✓	3/3/04
18	✓	✓	3/3/04
19	✓	✓	3/3/04
20	✓	✓	3/3/04
21	✓	✓	3/3/04
22	✓	✓	3/3/04
23	✓	✓	3/3/04
24	✓	✓	3/3/04
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31	✓	✓	3/3/04
32	✓	✓	3/3/04
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46	✓	✓	3/3/04
47	✓	✓	3/3/04
48	✓	✓	3/3/04
49	✓	✓	3/3/04
50	✓	✓	3/3/04

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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2